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FOR SE OF FORM 24/48			

FEC Schedule E (Form 24/28) Rev. 09/2013

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Freedom Partners Action Fund, Inc.		FEC IDENTIFICATION NUMBER ▼ C C00564765	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Conservative Connector, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 17 / 2016	
Mailing Address 190 Monroe Avenue Ste. 500		Amount 28.57	
City Grand Rapids	State MI	Zip Code 49503	Transaction ID : SE24.001
Purpose of Expenditure EMAIL MARKETING EXPENSE (Estimate)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate CATHERINE CORTEZ MASTO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 1128589.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee THE SINGULARIS GROUP, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 18 / 2016	
Mailing Address PO BOX 9265		Amount 72681.70	
City SHAWNEE MISSION	State KS	Zip Code 66201	Transaction ID : SE24.598
Purpose of Expenditure Direct Mail Expense		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 11 / 2016
Name of Federal Candidate CATHERINE CORTEZ MASTO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 1128589.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	72710.27
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas F. Maxwell III

[Electronically Filed]

Date

MM / DD / YYYY
05 / 18 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Freedom Partners Action Fund, Inc.		FEC IDENTIFICATION NUMBER ▼ C C00564765	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee THE SINGULARIS GROUP, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 18 / 2016	
Mailing Address PO BOX 9265		Amount 6690.99	
City SHAWNEE MISSION	State KS	Zip Code 66201	Transaction ID : SE24.607
Purpose of Expenditure Direct Mail Expense		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 16 / 2016
Name of Federal Candidate CATHERINE CORTEZ MASTO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		1128589.29	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee I360		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 18 / 2016	
Mailing Address PO BOX 37046		Amount 2990.69	
City BALTIMORE	State MD	Zip Code 21297	Transaction ID : SE24.002
Purpose of Expenditure Direct Mail Expense		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 17 / 2016
Name of Federal Candidate CATHERINE CORTEZ MASTO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		1128589.29	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	9681.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	91641.95

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas F. Maxwell III

[Electronically Filed]

Date

MM / DD / YYYY
05 / 18 / 2016

Signature